

Bennett. (Alice)

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PERIODIC INSANITY AS ILLUSTRATED IN
THE CASE OF SARAH J. WHITELING,
AND OTHERS.*

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MR. PRESIDENT AND FELLOWS OF THE MEDICO-LEGAL SOCIETY:—I have come here to-night to appeal to you, and through you, on behalf of woman as a criminal ; woman, upon whom nature has laid peculiar burdens, by virtue of which peculiar susceptibilities and dangers are inherent in her organism ; the complex forces of whose nature, too seldom understood even by herself, are as a sealed book to the mass of law-makers and law-dispensers, who, with no knowledge of the forces with which they are dealing, remorselessly judge and condemn the results of the operation of those forces.

Gentlemen, I feel no humiliation in confessing to you that woman is, in some directions, weaker than man. She is a combination of strength and weakness ; as strong in her strength as weak in her weakness ; if it happens to be my mission to speak to you to-night only of the latter, do not look upon me as a renegade ; strength lies not in the ignoring of weakness but rather in its courageous recognition.

Without entering at any length into physiological questions I may be permitted to recall a few fundamental facts :

The physiological life of woman, as woman, is strongly

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marked by fluctuations and epochs of special significance.

There are in nature no sharply dividing lines, but for the sake of convenience we may speak of :

First—The initial or period of sexual life, or pubescence; an indefinite and varying time vaguely accepted as carrying with itself the liability to some nervous disturbance.

Second—The closing period of sexual life, the menopause, or “change of life,” also indefinite as to time, and also accepted in the popular mind as a “critical” period.

Every hospital for the insane has many cases of insanity which had their starting points at one of these two periods, and in all the standard works on mental and other diseases of women, we find mention of insanity and other neuroses of puberty and of the menopause.

Between these two extremes we have the recurrence once in four weeks, interrupted, in the healthy woman, only by the special event of child-bearing, of the mysterious functional disturbance known as menstruation.

Physiologists still disagree as to the precise causes and significance of this event in the animal economy; into this discussion we need not enter, but we are bound to study it in its manifestations and effects.

I wonder if anyone, not a woman, can ever understand how this event, under the most carefully chosen conditions, stirs her nervous system to its remotest fibre; and yet it should be easy to believe, when we remember that we are here considering forces which have to do with the beginnings of life itself.

Physiologists have measured and demonstrated an “increase of vascular tension” throughout the whole system, in addition to special localized changes attending this function, but there are effects which cannot be

measured—scarcely described—a condition of unstable equilibrium, a weakened resistance to external forces, and a *potential liability* to explosive nervous phenomena, not sufficiently emphasized in any of the works I have met with on the nervous diseases of women, and almost wholly unrecognized in medical jurisprudence, in either practice or theory.

Understand me, I am not of those who look upon each recurring menstrual period as one of “temporary insanity,” during which every woman is, of necessity, incapacitated mentally and physically for the ordinary duties and responsibilities of life; far from it, but I do maintain it is a period no woman dare ignore.

A perfectly healthy woman, strong in the habit of self-control and of mental equipoise, subjected to no extraordinary physical or mental strain, scarcely bends before the passing storm; but in so far as these ideal conditions are departed from, so far is some deviation from the normal equilibrium of the brain and nervous system possible, or even probable.

I repeat that there resides in every woman a *potential liability* to explosive nervous phenomena at this period, in its normal physiological occurrence, still more in any abnormal interference with its regular recurrence.

Conditions under which these potential disturbances are most liable to become actual, in other words, the causes of periodic insanity, and other nervous disturbances, among women, I would group, for convenience, without pretending to scientific completeness, as follows:

First—Subjective Causes:

(a) A weakened resistance of the brain centers which may be either natural, the result of disease, or the result of defective training.

(b) Valvular disease of the heart.

From my own observations I have come to consider this of very great importance. Some years ago, in a paper presented to the Medical Society of the State of Pennsylvania, I called attention to the almost constant coincidence of valvular heart disease with a form of insanity characterized by hallucinations of the senses with delusions of persecution, suggesting a relation of cause and effect.

More recently, approaching the subject from another standpoint, I stumbled upon the observation that nearly all my cases ascribed to "change of life" were of this type and associated with valvular disease of the heart.

I could give you the history of about fifty of such cases possessing marked features common to all.

It is only during the preparation of this paper that I have come to see that the same condition runs through most of my cases of periodical mental disturbance, the history of some of which I want to give you, if time permits.

And is there not reasonableness in the assumption, which is borne out by the history of these cases, that the delicate structure of the brain must feel, more or less according to its powers of resistance, any defect on the part of the heart, which, acting somewhat after the manner of a pump, supplies it with the elements necessary to its integrity, that, while under ordinary conditions the brain may resist successfully the threatening danger, at a time of extraordinary susceptibility, such as exists at the menstrual period, it may give way, either temporarily, recovering to go through the same experience at the next period of special weakness, or, failing to recover its lost harmonies, to remain permanently overthrown?

(c) Local diseases of the generative organs and appendages, acting reflexly.

(d) Any disease or conditions depressing the system generally.

Second—Objective Causes.

Under which may be grouped all the external sources of irritation and nerve exhaustion incident to daily life.

When I consider the life-conditions of the average woman of the middle and lower classes, the large and repeated demands on her vitality made by frequent child-bearing, with the never ending wear and tear of body and mind, which men so seldom understand, inseparable from the cares of a household, in addition to which she not infrequently must do some special work to aid in the support of the family ; when I consider how often is lacking in her the kind words and helpful sympathy which alone makes such a stupendous drain upon her vital forces possible, safely possible, then I wonder, not that women become insane, but that they do not more often become so.

A recent writer says : “It may be questioned if even physicians at all times fully appreciate the demand made upon the female organization by reproduction.

* * * The repetition of pregnancy and lactation, with the duties and cares which multiply as life advances, exhaust the nerve power and lead in many cases to mental derangement.” (*Skene's Treatise on Diseases of Women*, 1888).

Doubtless the mental aberrations of the menstrual period are more frequent than have been noted, but being temporary and occurring in the form of eccentricities, or alterations in dispositions or conduct, they are not recognized as such in family life.

If there be a nerve explosion in the form of some act of violence, the woman at once becomes a criminal, and it is a matter of record that the most unnatural and

monstrous deeds have been done by women at such a time, deeds the very unnaturalness of which should plead for the doer, but which on the contrary only serve to intensify the popular clamor for the blood of the unfortunate, so-called criminal.

Of such a nature, I maintain, were the crimes of Sarah J. Whiteling, who administered poison to her husband, daughter and son, on March 20, April 20, and May 22, respectively, from the effects of which they died and for which she is to be hanged March 27.

I believe the case of sufficient interest to present to you somewhat in detail :

Sarah Jane Whiteling, born Goff, age 40, of German extraction, lost both parents before her recollection; no reliable family history obtainable. Her early associations were evil; she was never sent to school, and learned to read after she was married.

She confesses to have lived an irregular life, beginning at twelve years of age, which was passed in the West until after the Chicago fire, when she came to Philadelphia with her first husband, a man named Brown. At that time she had no living children, but several miscarriages.

In about a year, Brown was committed to prison for some serious offence, and she afterwards lost sight of him altogether.

For several years following she lived a dissolute life. She gave birth to one child, which lived but a short time, and, again, at the Philadelphia Almshouse, a child, Bertha, was born—one of the victims of the poisoning. The father of Bertha was one Thomas Story.

She once spent two weeks in the county prison for stealing.

She was married to John Whiteling March the 27th, 1880, and claims to have been entirely faithful to him from that time. By the marriage she had one living child—William—also a victim of the poisoning, born March 27th, 1887. She also had two miscarriages.

She describes her life with Whiteling as one of hardships. While not positively unkind, he was a drinking man, indisposed to work, and allowed her to wash, scrub, etc., for the support of the family. He also had been in prison, as had other members of his family.

She claims to have been in poor health much of that time, and was at times treated for falling of the womb and other troubles.

At her menstrual periods, she habitually suffered from pain in the head and back, and dizziness—sometimes compelling her to go to bed.

In February, 1888, John Whiteling was taken sick, was at times violently delirious, and required very close attention, in which she had no help either by night or day for about four weeks, in addition to taking care of her home and two little children. In her own words, she was "nearly wild" with the strain upon her.

At this time her menstrual period was due and did not appear, and her mental strain was aggravated by the fear that she was pregnant.

On the morning of March the 20th, John Whiteling was very restless, and she says that she felt "nearly distracted." Some members of his lodge were coming to stay with him that night for the first time, and she says the thought came to her: "If I can only give him something to keep him quiet until the men come."

She had a box of "Rough on Rats" bought for the purpose of killing vermin in the house some time previously. She was preparing some egg-nogg for the sick man,

and something seemed to say to her: "Go to the closet and get some of that powder." She says the thought of killing him was not present, but that she "took a little of the powder on the end of the spoon, and mixed it with the drink." He died the same day, and she became frightened at what she had done, and dared not speak of it. A certificate of death from "inflammation of the bowels" was given.

In April, Bertha Whiteling, aged 9 years, then attending school, was accused of stealing from her teacher. It was put in the papers, and her mother was much worried about it. Finally, on the 20th of April, she gave to her also a dose of "Rough on Rats." It was charged by the prosecution that several doses were given, but I have seen no proof of it, and Mrs. Whiteling says positively that it was but one.

The child lived four days, and the same physician gave a certificate of death from "gastric fever."

In explanation of this second murder, Mrs. Whiteling at one time said she "thought it would make Bertha a better girl if she could give her something to make her weak and sick." At another time, she said it was because she thought "it would be better if they were all under ground together."

In a confession taken down by the Coroner, I am told that she said she wanted to get rid of them all because they were an encumbrance, or words to that effect. This last paper I have not been able to find among the other records, and I have never been able to extract from Mrs. Whiteling any sentiment of that sort, which, indeed, seems inconsistent with all my knowledge of her.

On May the 22d, she gave some of the same powder to her son Willie, aged 2 years, and he also died after a sickness of four days.

The same physician refused to attend this third member of the family, and a young doctor in the neighborhood, who saw the child once, gave a certificate of death from "congestion of the bowels."

Here she says she had the intention of killing her child, and to end her own life, so soon as he was buried, because she "wanted the whole family together under the ground."

Coming home from the burial of Willie, she says she mixed a last dose of the poison intended for herself, and kneeling down asked God to forgive her for what she had done, and what she was about to do. While on her knees, she "felt the touch of a hand on her shoulder, and a voice said: 'Don't do it; I forgive you.'" Several times she tried to take the poison, but "something seemed to prevent her lifting the glass," and she gradually came to believe that she was forgiven, and went to church, resolved to live a better life.

It was one week later that the matter was brought to the attention of the coroner, the bodies exhumed and proofs of poisoning found.

Mrs. Whiteling made immediate confession, was committed to prison, tried in November, convicted of "murder in the first degree" and sentenced to be hanged March the 27th, 1889."

I saw this woman three times before her trial and have seen her three times since she has been under sentence of death.

In person she is about five feet in height, squarely built, with a tendency to the accumulation of fat; all her muscular movements are heavy and lack precision; complexion dark; expression lacking intelligence. There has been no dissent from the common judgment that her mind is of a low order. Her power of attention is de-

fective ; she rambles from the subject in conversation and dwells disproportionately upon trifles. At no time has she seemed to comprehend the awful nature of her crime and their import to herself. At this time she is looking forward to her execution with apparent indifference, speaks of it with smiles, and is convinced there will be no reprieve, because " her Willie was born on the same day of the month appointed for her execution."

On examination I found her suffering from prolapse of the uterus, with chronic enlargement and internal inflammatory changes.

Menstruation during the past year has occurred only in February, June and December.

She has a mitral regurgitant murmur of the heart, so slight as almost to escape detection, but also observed by one of the experts for the commonwealth.

The pulse was irregular both as to frequency and volume. In connection with the mitral defect of the heart and the unequal volume of the pulse I attach considerable importance to the hallucinations of hearing, which she gives the history of, as occurring previous to giving the poison to her husband, when she was about to swallow the poison herself, and on two occasions since she has been in the prison.

An examination of the eyes was made at my request by Dr. L. J. Lautenbach, an ophthalmologist who has assisted me in the study of about 600 cases of insanity by this method.

Vascular changes in the deep structures of the eye, as seen by the ophthalmoscope, I have come to regard as a valuable index to similar conditions in the brain.

The following is extracted from Dr. Lautenbach's report to me :

" The eyes indicate congestion, periodic in the sense of

an accentuation of congestion at different times, each of these congestions having causative relation to the deterioration of the optic nerve—shown by the appearance of the nerves and by the contracted fields for both form and color. Of course the inference is obvious that these congestions, not being occasioned in the eyes themselves, are the same as are present in the brain where they have been followed by similar results."

This I regard as the most positive direct evidence obtained, or obtainable, but it was mostly ruled out at the trial.

Taking the mental and moral measure of this woman as she presents herself without any evidence, one finds it impossible to believe that she has, or ever had, when in her right mind, the force of will to deliberately plan and execute one, still less three murders.

Her nature is kind and affectionate; never vicious, ill-tempered, or resentful even toward those who wish her harm. Above everything else she is a weak woman; one who has drifted with the tide.

Her life has been evil, because evil has been in the direction of the least resistance. In other words she has a brain weak, unstable and yielding to slightest influences, such a brain as, under exciting causes, is easily unbalanced and determines insane acts.

Keeping in mind the dates of her series of crimes—March 20, April 20, May 22—remembering that her menstrual period failed to appear in March, that it failed also in April and again in May, remembering, too, the conditions of her life at this time, we cannot fail to see that a combination of circumstances favorable to the production of insanity was present.

To recapitulate: We have a woman of naturally weak brain which has been subjected to periodic congestions,

or fulness of the blood vessels at the menstrual period, in whom the function abruptly ceases and the periodic vascular fulness thereby fails of its usual relief. She is further dragged down by internal diseases of long standing, and her power of resistance further weakened by a defective heart. Add to this the extraordinary physical and mental strain imposed upon her during those weeks when she had no help either night or day in caring for her sick husband and in providing for the wants of her two little children.

I repeat, that here are all the conditions necessary to the production of insanity, such as have been seen to produce insanity over and over again.

Based upon all these facts, and also upon the evidence as given, my judgment is that Sarah J. Whiteling was in an unnatural mental state over a period of three months and more, and that, periodically with the struggle of nature to re-establish the interrupted function, her mind became unbalanced, to a degree that rendered her incapable of judging between right and wrong, and of properly directing her own actions.

The case of the Commonwealth *vs.* Whiteling came to trial at a time when a wave of indignation against the common practice of insuring the lives of young children was sweeping over the community.

The horror inspired by these unnatural deeds—unnatural most truly—was deepened by the idea which rapidly gained ground that they had been done for money, for the paltry sum obtained by the insurance upon the lives of the victims, and popular clamor demanded the conviction of the wife and mother.

At the present time this idea is still firmly rooted in the public mind, judging from the comments of the newspapers, but it is a most unjust one and wholly without support.

The small sums received were immediately expended in the payment of debts and funeral expenses, and it was in evidence that the undertaker felt called on to check extravagant outlay on these occasions. The policies were not of recent date, and it was in evidence that it was almost the universal custom in the neighborhood where the Whitelings lived to have the children's lives insured.

There was no evidence that she spent a penny for her own pleasure, but, on the contrary, she was doing washing and other work for her support after the death of the last child.

It is right to say here that the Prosecuting Attorney himself told me that he did not regard the insurance money as a motive, but rather her desire to rid herself of her family as encumbrances.

The latter hypothesis I regard as inconsistent with her nature, and with the evidence that she had been a kind and affectionate mother, with all a mother's natural love for her offspring.

Direct evidence of temporary, functional insanity, of a nature to satisfy the legal mind, must always be difficult, if not impossible to produce. In this case the prisoner was peculiarly defenceless, from the fact that she had no living relatives, and there was no one who had been with her and could testify to her exact condition at the times when she committed her first, second and third unnatural crimes.

A woman who kept a store in the neighborhood, the clerk in the drug store where she bought the poison, several women for whom she had washed and sewed, a number of neighbors who had seen her "off and on," the Coroner, a police officer and six doctors—a formidable array of eighteen witnesses—testified in rapid suc-

cession that they had not "seen anything insane in the conduct of the prisoner at the bar." There was really no reason why the Commonwealth should have stopped at eighteen, unless at this point the jury was sufficiently impressed with the *quantity* of the evidence.

Of the six doctors, two were the attending physicians, who gave the certificates of death, both confessedly without experience in mental diseases: one was the prison physician, who had no previous acquaintance with the prisoner; three were experts of acknowledged high standing, of whom two had visited her once, and one three times in prison. Their testimony, as was that of the two experts called by the defence, was kept rigidly within the limits of their own personal observations. Inference, reasoning from premises and analogy have their uses, but are not evidence. The question, "Did you yourself see evidences of insanity in this woman?" was necessarily answered in the negative, since no one has taken the ground that she is now insane, beyond being of low mental grade, or that she had been so since her arrest and imprisonment.

The following extracts from the evidence are taken from stenographic notes of the inquest and trial, kindly loaned me by the District Attorney:

M. E. Pomeroy, a neighbor, at the Coroner's inquest, testified "that Mrs. Whiteling came to her house and told her the bodies had been taken up, and that she expected to be arrested, and that she was laughing when she was telling her about it."

In the evidence of Mrs. Martin, a neighbor, it was developed that the prisoner told her that she would not have Willie examined, post-mortem, "because she had a child opened once and it came to life again."

Mr. Baily, a brother-in-law to the prisoner, testified

that he "always had thought the woman flighty in some way ;" also he "took notice sometimes *she could talk sensibly and sometimes she could not.*"

Undertaker Kehr, who buried the three victims, testified that he visited the house about a dozen times ; that the prisoner "acted and talked foolishly ; at times would cry and again would laugh." When we drove up with the wagon to the funeral of Bertha, she was across the street and looked like a wild woman." While helping him to dress Willie for burial, "she would laugh and would talk about getting married, and would get up and cry and then would laugh again." "When I was there I did not think she was a sane woman."

On cross-examination : "The whole tenor of her actions I think indicated that she was not of sound mind. * * * All through I considered her of unsound mind ; I would not swear that she was a crazy woman but I can say she was a woman of unsound mind."

This opinion the witness repeated in different forms over and over again.

The following illustrates a method of cross-examination :

By District Attorney—"Now, you say her conduct led you to believe that she was insane. Did you ever see a person under such circumstances before, so as to be able to compare her conduct with that of other people. I mean one having poisoned three people?"

Ans.—"I never had a case of that kind before."

District Attorney—"Then you really do not know how a person would act under such circumstances?"

Ans.—"I do not know."

Miss Mathews, the matron of the prison, now in charge of Mrs. Whiteling, who had an experience of

seven years as nurse in a hospital for the insane before occupying her present position, has recently told me that daily observations over a period of months have convinced her that Mrs. Whiteling is an irresponsible being.

I last saw Jane Whiteling in her prison cell, a week ago, March 5. She was in bed, it being near the close of a menstrual flow of five day's duration. Throughout that time and especially on the day preceding my visit the matron told me she had observed a marked alteration in her; a tendency to excitement with alternations of pallor and flushings of the face.

I was forcibly impressed by the more than ordinary want of steadiness in her mental action and by the fact that her memory was not so good as at previous examinations; she herself said: "I don't seem to have any remember." More than ordinarily she failed to grasp any aspect of the situation. She greeted me with the remark: "Oh, I was terrible happy yesterday," but when I asked her why, she could give no satisfactory reason; "it just come to her."

Later, after speaking to her of her responsibility for her crimes, she said: "I *know* I can't be a wicked woman or I couldn't be so happy."

And as I left her in her prison cell I could not help wondering what possible end was to be served; in how much was society to be the safer, the majesty of the law to be vindicated, by killing this simple, ignorant, unfortunate victim of forces which had proved too strong for her feeble powers of resistance.

A case which presents similar features was that of Annie Gaskin, who killed her own infant by cutting its throat, December 27, 1885. She was tried in Philadelphia, acquitted on the ground of insanity at the time of

the commission of the act, and was sent to the hospital at Norristown, where I had her under observation for more than a year.

Annie Gaskin was also of low mental grade, although she had always been able to work for her living, had married and cared for her own household.

She had one sister of feebler grade than herself who was known as "Simple Mattie."

Annie Gaskin had also been subject to "pain in the head and dizziness" at her menstrual periods, and it was at such a time, when under great grief and anxiety following the death of her husband, with extreme poverty confronting herself and her little children, that she took the life of one of them.

She rose at four o'clock in the morning, with her three children sleeping beside her, procured a dull knife and cut the throat of her babe, ten weeks old, making a ragged wound five and a half inches long, extending quite through to the cerebral column—a wound that would seem to require almost inhuman ferocity to inflict with the instrument at her command.

This done she redressed the child in clean clothing, put the bloody garments into a bucket of water and laid herself down to rest.

At six o'clock she went to her sister's, two squares away and told her to "come, for the cat had killed the baby."

There was no evidence at the trial that she had ever been thought insane previous to this act.

In her year or more of hospital life with us she was uniformly gentle, patient and industrious, never ill-tempered or even irritable. For about two days each month she complained of her head and generally spent the time in bed and was quieter than usual; there was never any out-break of violence.

At the end of the time named she was discharged and given into the hands of her friends with the consent of the Court.

I have no record of the examination of her eyes or heart.

In November, 1882, Caroline Metzgar, a German girl, 17½ years old, apparently sound in body and mind, living at service in Philadelphia, arose in the night and made a savage attack with a hatchet upon her mistress and the infant child of the latter—both sleeping in the same room with herself.

Neither of the victims died, but for our purpose the significance of the deed is the same.

There was no motive for the crime, for she had been on exceptionally friendly terms with her mistress, as evidenced by the latter's asking the girl to sleep in her room—she being alone and nervous.

No attempt was made to conceal the fact. She was arrested some time later in bed, still wearing the clothes stained with the blood of her victimis.

It was difficult to arouse any sympathy at the time for this girl, who seemed both stupid and sullen.

I have not been able to get the notes of the trial, but it seems to me rather remarkable that she was acquitted on the ground of insanity.

She came to the Norristown Hospital in June, 1883.

Careful inquiry of her mother developed the fact that her first, and, up to that time, only menstrual period had occurred six months before this deed. That periodically since that occurrence she had been restless and unlike herself, sometimes getting up at night to walk.

On examination, she was found to be suffering from a flexion of the uterus. We found that at each periodical struggle of nature to establish the function, she became

melancholy and restless, but there was never any attempt at violence.

Retinal congestion in both eyes was found by ophthalmoscopic examination. I have no record of examination of the heart.

Under the influence of local mechanical treatment, the uterus was restored to proper position, gradually her menstrual periods were regularly established, and she became altogether a different girl, one whose intelligence, thorough honesty and unfailing good nature won the affection and confidence of all who knew her.

She never seemed to have any remembrance of that one act of violence.

Upon proper presentation of the facts to the Court, she was discharged after thirteen months.

She has since married, and I do not doubt that she will remain for the rest of her life a worthy member of society.

Now, what is to be the conclusion of this whole matter? That I will not attempt to answer.

These observations of my own have been offered as a contribution toward the work of the committee appointed by this society to investigate the subject of "Insanity as a result of sexual causes," and with the hope of inciting a much wider circle of similar investigations.

I would have no woman excused from the consequences of her acts merely because she is a woman.

I would not have even insane women always pardoned for their offences, lest there get abroad a spirit, well illustrated by a former insane patient of my own, who once said to me: "Doctor, *I can do anything I please; you know God never sends crazy people to hell.*"

This same woman showed considerable power of self-control when the necessity for it presented itself.

I have a wholesome respect for a public sentiment which looks with fear and doubt upon a woman whose brain has once shown itself capable of reversing the highest laws of her being, and of transforming, for the time, a gentle, loving woman into a blood thirsty monster, often seeking the most revolting means of accomplishing such deeds as I have recounted to you to-night.

It should be made plain that that brain has been subjected to overwhelming forces, assailing its integrity, such as, in all human probability, will not again present themselves, and from the effects of which it has entirely recovered, before I would have such a woman go free.

So long as there is a doubt, society should have the benefit of that doubt.

And for the unfortunate subject you may lock her within the walls of an asylum, in a prison-cell if you must—anywhere—but you need not kill her.

“Not guilty by reason of insanity” should not mean immediate freedom from restraint; freedom perhaps to go and be again insane and again to commit crime.

Nor should it mean, as it does in my native State, Massachusetts, a life sentence to a lunatic asylum for one who has once been insane, and by reason of insanity has taken a life.

Such a practical denial of the possibility of recovery from disease of the brain is both cowardly and unscientific.

May there not be found some middle ground, at once safe and humane, where every reasonable doubt, whether in the interests of the safety of society, on the one hand, or in defence of the sacred rights of the individual, on the other, may have its due consideration and weight?

I submit this question to you.

DISCUSSION ON DR. ALICE BENNETT'S PAPER.

WASHINGTON, D. C., March 2, 1889.

MY DEAR SIR:—I have your favor relative to the Whiteling case, and Dr. Bennett's brief before the Penn. Board of Pardons in the same.

Of the individual case I know nothing beyond the newspaper statements and the brief already referred to, but it is a fact well known to every one familiar with insanity that sexual disorder is a frequent cause of insanity in women, and that the type of insanity depending on disordered menstruation is emotional, often suicidal, sometimes homicidal.

If, as Dr. Bennett intimates, hallucinations of hearing are present in Mrs. Whiteling, there can be no question of her insanity.

While the fact should never be lost sight of that multitudes of women suffer from ill health with disordered menstruation who go through life perfectly sane, and in cases of homicide, indubitable demonstrable evidence of mental alienation ought to be present before the individual is pronounced insane, yet the studies of a lifetime among them have so impressed me with the intimate dependence of the mental condition upon the physical state that in any case where such unnatural crime as infanticide is shown to be recurrent and associated with the menstrual period, in the absence of any other observed evidence of insanity, I should prefer to say that I had failed to discover evidence that undoubtedly existed rather than to pronounce the woman not insane.

Very truly yours,
W. W. GODDING.

CLARK BELL, Esq., President Medico-Legal Society.

ALABAMA INSANE HOSPITAL, }
TUSCALOOSA, ALA., Feb. 24th, 1889. }

CLARK BELL, Esq., New York City:—

DEAR SIR—I am in receipt of yours of the 19th inst., inclosing the newspaper clippings describing the cases of Mrs. Whiteling and Mrs. Burrows, who are under sentence of death for murder. The facts, as recited in the newspapers, are, of course, too meagre to justify a positive expression of opinion as to the mental condition of these unfortunate women, but they are quite sufficient to raise a reasonable doubt of their sanity. In view of the statements of the experts who have examined these women, it is clearly the duty of the Court of Pardons, or whoever has the authority, to send Mrs. Whiteling and Mrs. Burrows to an asylum for the insane, where they should be kept under expert observation until their condition can be clearly ascertained. If insane, they shou'd be kept in confinement

until restored, and then only discharged by order of the Governor; but if they are not insane, they should be remanded to prison. This is the course we pursue in Alabama. I can hardly believe that a great State like Pennsylvania will permit the execution of persons who are known to be insane. I am aware of the fact that there has been recently a few notable departures from this rule, and that a few men of high authority have been found to justify such an inhuman procedure; but I am glad to say that the consensus of opinion, both legal and medical, utterly oppose a return to this barbarous practice.

I have met with many cases in my thirty years' care of the insane of the homicidal impulse in women at the climactic period of life, and as a result of sexual irregularities in early life. A few years ago, a lady of superior culture and refinement aged twenty-eight, developed a species of homicidal mania two weeks after her marriage to her second husband. She attempted the life of this husband, and succeeded in destroying with poison her two children by a former husband. She was sent here, and in three months was returned home perfectly restored, and has since made a good wife and mother. I could cite many similar cases if called upon.

I trust that your efforts in behalf of Mrs. Whiteling and Mrs. Burrows will prove successful and that we shall hear no more in this humane and enlightened age of the barbarous and disgraceful practice of condemning the insane to death.

Very truly yours,

P. BRYCE, Supt.

EAST MISSISSIPPI INSANE ASYLUM,)
MERIDIAN, Miss., Feb. 20, 1889.)

CLARK BELL, Esq.:—

DEAR SIR—Yours of the 15th inst., with enclosed clippings from New York papers, to hand.

While I, of course, know nothing of the merits of the case of either Mrs. Burrows or Mrs. Whiteling, yet from the information obtained from these clippings, with reference to Mrs. Burrows' case, I would say that on its face, it presents to my mind clearly, one of *insanity* of the *emotional type*. While she may not have shown it in any other act, the one of trying to take the life of her husband and herself looks as though it was *the mad thought of the moment*, especially when we learn that she had conversed freely with her neighbors, yet had made no threat. Prevented from self-destruction, she carries with her into the trial the weapon with which she hopes to accomplish it, viz.: the withdrawal of the plea of insanity and the pleading of guilty. Certainly no sane person would do this. An open attempt at suicide before the bar of the court, and it is permitted. While I am no lawyer, yet it does occur to me that where a plea of *insanity* is entered, it should be provided for by law, that it must in every case be entered upon oath, by some relatives, friends or attorney of the accused, and that no power in such cases should rest in the defendant to withdraw such plea, and that a trial should at once be entered into to test the question of sanity or insanity, before entering upon the criminal trial, as is so often done in *haecas corpus* cases, to test the right to bail. To ask an *insane* person to

answer "Guilty," or "Not Guilty," seems to me travesty upon criminal jurisprudence.

I feel that it is the duty of the Medico-Legal Society to interpose for mercy, especially in the case of Mrs. Burrows, and Mrs. Whiteling, too, if there are good reasons to *suspect* insanity, and I am of the opinion that the Board of Pardons should be willing to have the case submitted to a competent commission of experts for thorough examination and investigation, and that such report as made by this commission should form a part of the reasons for their action in these cases, before submitting them to execution. To this end I think the Society should diligently work.

C. A. RICE, M.D.

CLEVELAND, March 11, 1889.

HON. CLARK BELL:

Your note just received. Answer must be brief, the time allotted is so short—the 18th inst. Can only submit my views in the form of propositions, without argument or facts upon which they are based, and by which they are supported.

I. But one reason in any case where the penalty is death can justify such extreme judgment, to wit, the protection of society—*salus populi suprema lex*—to get rid of the criminal and as a warning to others is the only justification, not punishment but protection to the community. The general protection of society is so inexorable that the law does not weigh nicely the degree of intelligence or of mental strength in the individual offender. *De minimis non curat lex* is the rule of law. If only the well balanced minds were held accountable, the courts might be abolished, and society left to defend itself *en masse*. A rule of law must be drawn somewhere, and no better has yet been discovered than the old well tried one, to wit: "A knowledge of right and wrong." The old maxim applies here also: *Omnis innovatio plus novitate perturbat, quam utilitate prodest*. It is dangerous to allow even judges to swerve from long established precedent or waiver according to their own opinions on an old well settled principle of law and decide such a case on their own judgment. He must declare the old law, not make a new one, when the principle has been long settled. Then there is stability and the rule of law is understood. The wisdom of the law has established a rule of law, in fixing responsibility in cases of murder. The accused must know that his act is wrong and against law. This long acted upon and much assailed rule stands a breakwater against fine spun theories of emotion in human responsibility for conduct affecting society. The rule doubtless sometimes works injury to the individual for the general good. What rule of law does not? In the end, however, it works the greatest good to the community to the greatest number. Without the rule the courts would be at sea without sun or compass.

II. The rule of responsibility for crime being settled, a vastly important question remains, and that is how is the question whether there is knowledge of right and wrong to be determined as in the case in hand? Did Mrs. Whiteling have this knowledge at the time of the homicide? If she had not this knowledge, why not? It is impossible to avoid the use of the term insanity, yet its use adds greatly to the difficulty and confusion in settling these questions on which the whole case hangs.

Insanity is a relative term of absolutely impossible definition. Language can no more master it than it can the terms health, sickness, light, darkness, heat, cold, good, evil. These are all relative terms. What is health to one person is sickness to another. What is light under one state of facts, is darkness under another. One person is cold when another is warm. An act may be right under one state of facts and wrong under another. A condition of sanity in one person is insanity in another. What would be called insanity in a man who had acted differently in his previous life would be called his normal condition if such conduct has been his uniform rule of action. Hence the folly of relying upon or trying to define these relative terms. No definition can be formulated that does not complicate any case of alleged sanity.

Each case of so-called insanity is *sui generis*. No two cases are ever exactly alike, any more than any two cases of sickness are precisely alike. There are constitutional and a thousand other differences arising that render it necessary that each case should be judged by itself and compared with itself. All aberration of mind results from malformation of brain or from physical disease—generally from disease. It is impossible to express an intelligent opinion in a case of this kind without hearing or reading the evidence. I see no peculiar difficulties or complications in her case that do not arise in most of the cases where insanity is interposed as a defence. The state of her mind at the time of the homicide must be compared with that of her former self—with nobody else. A sudden or gradual change from her former mental state indicates disease somewhere. Sexual disturbance is a common cause of mental aberration—generally temporary in its effects. Knowledge and intent being the essence of the crime, a physical condition may have existed to such an extent as to totally obliterate the condition of knowledge and intent, which condition the law renders a complete defence. Here we see the necessity and wisdom of the old rule. The law does not contemplate responsibility in such a case.

From the items of evidence you send me, and from the well known fact that the local trouble mentioned is a frequent cause of mental disturbance, I am inclined to believe the defendant irresponsible for her act—the victim of disease, and not able to discriminate between right and wrong.

III. This being her condition, how illogical and wrong is the punishment that Dr Bennett seems to be struggling for. She as an expert and others perhaps, prays for imprisonment for life! She is guilty and should suffer the extreme penalty of the law, or she is innocent and should not be punished at all, but cared for in the most skillful and tenderest manner until restored to health—in the meantime simply restrained that she may not injure herself or others. There is no middle ground. If the cause alleged for her mental disturbance be correct, she may be expected to wholly recover from her infirmity, as the function disturbed is a self-limited one, and she is now near that limit, according to Dr. Bennett.

J. J. ELWELL, of the Cleveland Bar.

NOVA SCOTIA HOSPITAL FOR INSANE. }
HALIFAX, March 6, 1889. }

CLARK BELL Esq.:—

DEAR SIR—Your favor and enclosure received. Dr. Bennett's article is

well written, but she tries to prove too much. Her plea is that a menstrual woman, especially if a little light-headed, can be guilty of no crime—even murder—and of all the objections I have heard against women practicing as doctors, I have never seen the objection so forcibly, and I believe accurately put as she has done in her apostrophe to the powers that be. She also enters a plea for a monopoly of mental derangement from sexual causes, which I would wish to grant, if it could be done without ignoring the facts to the contrary. The sexual passions treat men pretty roughly when there is easily deranged mental balance.

The friends are the worst enemies of Sarah Whiteling when they are trying to force on her a life which she has forfeited to society—which if she retains she will be unable to use—if imprisoned for life, and society has in that life a threat as well as a possible future calamity, such as has occurred. Let her sleep. If a portion of the ability now I believe worse than wasted were expended in devising the best means for ridding society from such murderers—say by some method of euthanasia—it would be better than carrying on the present agitation against that inert mass (the law, precedent and the judiciary its exponent). I use the term inert in a complimentary sense, for my experience has led me to believe that conservation or inertia, as shown in the history of law, has been of more service to society than anything else—even the high fees make it a luxury that is indulged in with consideration by those who have anything to loose, for the reason that an essentially bad government, if stable, is immeasurably superior to any form that vacillates, so is the fixture of law and precedent of more benefit to society than a system that changes. For a road that has deep holes and rocks and quagmires is a safe road; when these never change their places we learn their location and avoid them, and they are only as moles or blemishes on a woman's face—unsightly. We may fill up the holes and change the appearance, but this may not be improvement—a smooth surface may have a treacherous foundation.

I don't think we can improve on the Christian religion, and I would like the common law to be as fixed an entity, mistake or no mistake. However, I think Dr. Bennett's enthusiasm has gotten ahead of her judgment.

With regard to the proposition, "insanity as the result of sexual causes," there is no room for argument. Causes of disease are predisposing or remote and exciting or proximate. Insanity (if we exclude the paretic or general paralysis and the traumatic insanities) has for remote cause either hereditary or defective nervous organization which does not originate in the disease we call insanity, unless when lighted up by the exciting or proximate which may be any one of, I may say, hundreds, of which sexual causes have no more influence than very many others. It was believed that the sexual system of females had much to do with causing insanity, but I have carefully looked over Dr. Bennett's reports and find that her experience corresponds with that of superintendents in general, the female sexual system being a cause amongst others, but nothing special to be noted more than in the case of men or the influence of any of the passions on a weakened nervous system.

But this subject is too wide for casual correspondence, and the time is too limited to dwell on it more at length. Yours truly,

A. P. REID.

MR. ALBERT BACH: Do you find, Dr. Bennett, as a result of sexual causes, any particular organic change evinced through an examination of the patient, which would lead you to the conclusion that this was an inducement towards insanity? I am of the opinion that nervous conditions are the result of disorder of the body, and not to be considered as evidence of insanity, destroying knowledge of right and wrong: in other words, that a mere impulse should not be considered as an excuse for the perpetration of crime.

DR. LUCY M. HALL: I have certainly been greatly interested in what has been said here this evening, and it is a subject to which I have necessarily given some thought, as at one time I was physician at the State Reformatory for women in Massachusetts, and the question of periodical excitement was one which I had considered in the discharge of my duties towards these women. For the sake of science and somewhat to satisfy my curiosity, I kept a tabulated record of the condition of women who had been removed to solitary confinement as punishment for outbreaks of violence (sometimes towards fellow prisoners, and sometimes to the officials in charge), knowing well that they would be punished. I found that in thirty cases there were twenty where women were menstruating at the time that these offenses were committed. During my service there I found no woman who was insane at that time. Dr. Eliza Mosher, my colleague, who preceded me at the prison, told me of one case there of absolute insanity—a young woman who was perfectly sane during the interval, and became decidedly insane during menstruation. From observation it was found that insanity recurred at the menstrual period and left her when the period terminated: finally she had to be sent to the Worcester Asylum. Now, to re-

turn to my cases. I observed them in solitary confinement, and I do not believe any one of them was insane. I simply believe they were of a low grade of intellect and allowed themselves to be swayed by their emotions more than a woman of cultivation would have done, and allowed themselves to commit these offences knowing they would be punished. I found that by reasoning with them and telling them that they must guard themselves and control themselves, there were fewer punishments at this time. I have known women whose shoes were too tight to become nervous and excited, and commit offences, and there are a thousand things that will make persons nervous and make them lose their balance, besides the one under consideration. I must say that I do not admire the tendency of scientific people, who are invariably finding scientific reasons, such as heredity, inebriety, and the subject under discussion, for all sorts of disorderly conduct, and we are in danger of arriving at a state where we will hold no one responsible for his misdeeds.

DR. ELON N. CARPENTER: My experience has been somewhat limited in these cases. I remember distinctly one case I have treated lately, a young girl, who is of very respectable parentage and a very well educated lady, who seems lucid at all times except during menstruation. Then she wants to murder. That seems to be her one idea. She has been at home from the asylum for two weeks, and even two months at a time, and I have had to keep a very close watch over her and keep her in confinement. I might be able to give you some more careful view of the subject later on, and would be glad to look the matter up and write my opinion based on my experience.

DR. MATTHEW D. FIELD: It is a question whether we speak of the title of the paper or of the case. I do not

think that because Mrs. Whiteling was a woman and menstruated that this should be construed as an excuse for the crime.

The causes of insanity among men and women may be different, and to certain causes women are more susceptible. In considering responsibility for such a crime as that of which this woman is convicted, it is necessary to review carefully the act itself, considering all causes and motives that may be of benefit or gain to the perpetrator; then too, the individuals who are killed, and their relationship to the perpetrator.

For, when a person destroys those nearest and dearest to self, insanity may be strongly suspected, for statistics show that among the insane there are thirty suicides to one homicide, and eight to one are murderers of those who are naturally the nearest and dearest to themselves. With many of the homicides of the insane suicide is joined. I expect to testify to-morrow in the case of a woman who poisoned her three children, two of whom died. She was pregnant at the time, and in great want and distress. After having considered the motive for the crime it is just to look for physical and mental causes, and to see if such causes are sufficient to account for the act, or if the act be the natural outcome of such mental and physical states.

In the case of Mrs. Whiteling it appears from the paper of Dr. Bennett that sexual causes played only a small part in the causation of this crime; for though the three crimes were perpetrated at three menstrual periods, and this may serve in a measure to explain the time of the commitment of these crimes, there are other and stronger evidences of insanity. Women are more emotional than men, and are under a great nervous strain at the menstrual period, during pregnancy, parturition and lacta-

tion and at the climacteric. One can see how insanity with morbid impulses, suicidal or homicidal, may manifest themselves at these times, owing to the nervous strain and extra draught upon the vitality of the woman.

Yet, when we come to consider the statistics bearing upon these points, we are unable to discover anything important. While I can recall cases of insanity where the manifestations were more pronounced at the menstrual epoch, and of periodic insanity where the outbursts occurred at these times, nevertheless, I do not believe that I have met more cases of periodic insanity among women than men.

Dr. Field spoke at some length of the case of Mrs. Lebkuchner, which presented some features similar to Mrs. Whiteling's, which case will be reported in full by him at the next meeting.

MR. BELL: What was the date of the killing of the children.

Dr. FIELD: I think the 21st of March, the next Tuesday after the blizzard.

MRS. M. LOUISE THOMAS: I confess to a sense of impotency to treat with this subject, but the thought that comes to my mind is, that the woman whose case has been discussed in the paper read to us, is to be hanged by the neck in fourteen days from to-day, and that our conclusions on the matter may have some bearing upon the case. For myself, without previous knowledge on the scientific side of the question, I am disposed to accept the judgment of Dr. Bennett and to endorse her conclusions. I am the more disposed to do so because those who followed her, even those who seem to disagree with her in some degree, really made her argument stronger. My friend Dr. Hall confesses that in her experience she found it necessary to caution and ad-

vise the women under care to greater self control during their periodical sicknesses. She found them liable to greater excitement, and at times it became necessary to place them in confinement. The last speaker, Dr. Field, tells us that he believes that women are more subject to morbid influences than at other times. While he is not willing to declare that they are always led to extremes, he does admit that they are more subject to morbid impulses. Now, as I understand Dr. Bennett's paper, that is exactly what she says, that all are not alike weak nor all strong, nor all good, nor all wicked, but in the case of Mrs. Whiteling she is a woman of low mental grade, and of very feeble character; that she was friendless and alone; that she did nurse her husband through a long sickness; that to the best of her capacity she did care for her children, and there does not seem to have been any quarrel in the case. I cannot imagine a case where a woman would destroy her children; I could a case of her husband, when he had ill-treated her and became her enemy, but not her child. Why the lion, the dog, or any of the brute creation will defend their young. I do not believe any woman in her right mind will destroy her child. Now that I may not be mistaken, I have no scruples against capital punishment, and believe in standing in defence of the law, but in striving to change the law if it is unjust. To an American citizen obedience to the law should be the highest and first duty. While I do not believe in capital punishment being the best guard to society, as long as society considers it so individuals have to accept it. I think this sinful woman should be just as amenable to the law as the man, and the fact of the criminal being a woman and pitying her on that account, I would certainly not offer that as an argument to save the life of Mrs. Whiteling, but I think

the paper of Dr. Bennett has dealt fully with that. She has come up as a suppliant to New York, and we as scientists have a right to discuss the question in all its bearings. Now, while there is only fourteen days before the going out of this life, I wish the society would see the great power in this paper, and realize that this gentle lady has come and spoken for this woman with feelings superior to the ordinary woman. Women are very modest, and some might think that there was a breach of modesty in bringing this forward as a case, but I think not. The Board of Pardons of Pennsylvania ought to hold over and give time to inquire whether this woman was insane or suffering from insanity. The dignity of the law cannot suffer from the delay. I would like to see the Medico-Legal Society form itself into a Board and go before the Board of Pardons and persuade them to give this friendless woman a stay of proceedings, that she might feel that there are hearts in sympathy with her, low, degraded and wretched as she is. I know that many men will declare against what is called sentimentality, but if there is any ground of reason for belief in this woman's insanity, I think it ought to be strengthened and everything done to save her from her fate.

DR. ELIZABETH N. BRADLEY: I would like to ask Dr. Bennett when she speaks of affection of the heart, does she mean enaemic or valvular disturbance?

DR. BENNETT: I was referring to organic lesion.

DR. BRADLEY: I do not think that there should be a separate law for women and one for men, and I do believe that if a person commits murder, they should suffer by the law of the country in which the murder was committed. The Paris Medical School to which I belonged for some years, has a habit of getting all the

bodies of criminals, and subjecting them to a microscopical examination. The body and the head separated by the guillotin, a thorough examination, maeroscopical and microscopical, is made of each. There was not long ago a man named Pranini, who first killed a woman for her jewelry, then murdered the maid and child. They investigated his past life, which was one of wickedness and crime, and a pardon was refused. Why should a woman be punished less severely than a man? If we are to invoke physical lesion, certainly a person born in the lowest scums of the city is not a moral being, and from such persons we cannot expect a moral responsibility. A man I know of, started out from a church, where he had been praying, and met a priest who had never done him the slightest injury, and killed him. Was he accountable? He was the child of drunken parents. Either capital punishment exists in order to rid society of people who are dangerous to it, or it does not.

DR. FIELD: I just want to add that Mrs. Lebkuchner has an enæmic murmur of the heart and a rapid pulse.

MR. MORITZ ELLINGER: Perhaps I may be permitted to express to Dr. Bennett the thanks of the Medico-Legal Society for the very interesting paper which she presented this evening, outside of its immediate interest. The question discussed in the paper is one of the widest importance. Are we to recognize as a fact that women are so constituted organically that they cannot occupy the same positions that require the same force and strength that man must give in order to carry out his destiny? Woman has the tenderer body, although she is the strength and purifier of society, and in treating woman with tender care we should always think of them as the weaker vessels. I beg to express my thanks to the speaker before the last, Mrs. Thomas. She has presented

to my mind one of the strongest arguments in the case of Mrs. Whiteling. The very fact that a woman destroys her own child is so unnatural, so abnormal, that in my mind it at once establishes a strong presumption of insanity. A woman of sound and normal mind is incapable of destroying her own offspring. Doing that establishes beyond a doubt a diseased mind, and in listening to the case as presented by Dr. Bennett the belief grows stronger. I also agree that the Medico-Legal Society should take some decided issue in the case; that it should not be presented here merely for scientific purposes, but for the purpose of sounding the whole question. The men who are scientifically enabled to speak with authority on the question ought to do so, not for this particular woman, Mrs. Whiteling alone; not for the sake of saving a miserable life that has no friends in this world, but to save the reputation of the great city of Philadelphia and the State of Pennsylvania, of saving the reputation of humanity. We should not hang a person that is not responsible, and to my mind Mrs. Whiteling was insane at the time she committed the crime, therefore should not be executed, for it would be a disgrace to our civilization, and for that reason the Medico-Legal Society should come forward.

DR. FRANK H. INGRAM: I would offer a word of dissent from Mrs. Thomas in regard to the killing of children by the mother. It is not always an evidence of insanity, not any more so than killing of a son by the father. Generally, the mother has the greater affection, and it is to her credit. A great many of these women have none of the trials attending child-birth. I have known women to have three, four and five children and think no more of it than hanging out a washing. I think this is no evidence of insanity. I think as far as

sexual excess is concerned it may produce insanity. I have had over four thousand females in my charge, and for two years of that time I made it my business to see what effect menstruation had on them, and I found that in a great many of the cases the period preceding menstruation was the one in which the mental disturbance was most pronounced. It is well to call attention to the fact that in many women of poor nourishment, and where insanity has existed, we find that during the period of menstruation, and before, a marked change will take place in the little blood vessels and in the regions about the ear penetrating the brain and producing the peculiar sounds spoken of and hallucinations, and it depends almost wholly on the conduct of the nerves about the time of menstruating, preventing activity, and the slowness of hearing is most marked at this time, and the muscles arising from them would be more disturbed at that time.

President Bell called Ex-President Dr. Peet to the chair and said: To-morrow the Board of Pardons meets in Harrisburg to further consider the case of Mrs. Whiteling. On the 20th of February last they first considered it. A committee appointed by the society were represented before that Board, and a strong argument was presented by Dr. Alice Bennett and by Mr. E. W. Chamberlain, the chairman of that committee, who went there at my solicitation, and was heard before that Board. The law of Pennsylvania differs from that of New York in that the power of pardoning is not vested in the Executive. The case of Mrs. Burroughs is not yet before that Board. There has been no death warrant signed in her case. In Mrs. Whiteling's case the death warrant is signed for March 27th, 1889. Dr. Bennett and Dr. Bradley do not differ on the case. Dr. Bennett would be the last person to excuse any one for crime, if she did not believe them to

be insane. In the case cited by Dr. Bradley there was no plea of insanity offered, and insanity did not exist. If this woman was not insane she should suffer the penalty of the law. I hesitate as to our duty, because I am under the impression that the Board of Pardons are about to decide the case, not to set the woman free, but to give her a commutation of sentence to imprisonment for life. That would enable careful observations to be made, and then future action could determine her responsibility before the law.

When Dr. Goddings saw that hallucinations existed, he sustains the conviction of Dr. Bennett that insanity does exist. I yesterday wrote the Governor of Pennsylvania asking him to consider the propriety of giving a reprieve for a time, in case the Board of Pardons refused to commute her sentence, to enable him to call to the aid of the executive mind and the pardoning power, the most distinguished men of Pennsylvania, who could examine carefully and faithfully, and diagnose the case of the unfortunate woman, and see whether she was responsible for the act; and this was in the interest of the commonwealth of Pennsylvania, more even than of Mrs. Whiteling, for, as it has been stated, it is a question which not only the eyes of both cities, but the country are regarding. The woman says she has no desire to escape death. Whether she should be executed or not should only be determined by the facts of the case, looking towards whether they establish insanity. I ventured to suggest to the Governor that in cases where doubt exists, to satisfy it by asking eminent alienists to examine the case, and if need be, keep her under observation, and I begged of him to do so, if that emergency presented itself. I preferred not to wait until to-day, because of the immediate pressure of the case, and of

the environment which surrounds this unfortunate, and because I did not then know that the Board of Pardons had not yet acted. I have been deeply interested in the paper, and very greatly interested in the subject itself. There is another duty before us—to contribute our quota of sorrow at the death of one of the able honorary members of the society, Dr. Francis Wharton, LL. D. I will now ask Dr. Bennett if she will close the discussion.

DR. BENNETT: I do not feel like taking up any more time of the society, but it is my duty to answer any question that I can. In answer to Dr. Field's question as to the relation of these crimes to the menstrual periods: The last period, previous to the tragedy, occurred in February. The dates of the crimes, March 20th, April 20th and May 22d, represent to my mind the periodical effort of nature to re-establish the interrupted function. I can give no satisfactory answer to the question put by the secretary, Mr. Bach.

MR. E. W. CHAMBERLAIN: I endorse the paper which has been read this evening. I wanted to get to some possible means of reaching the cause which produces murders and cruelties of this kind. It is not merely a question of punishment and mercy to an individual; it is not merely a question of the application of the law to a particular case; I want to go somewhat deeper than that, and I think the information that I want to put before the country generally has been appreciated. I have received a number of appreciative letters from a good many sources, and I might say further that I have prepared a series of questions that are to be submitted to alienists, framed upon the suggestion of all the committee, and I am hopeful that the answers that will come to this question will result in some permanent benefit, looking to the removal of morbid conditions of this kind.